



Becky Dawes
Procurement Director

16-08-P, Request for Qualifications - Workers Compensation , Hepatitis B vaccine program and Post-Accident Drug/Alcohol Testing

Aiken County Government is soliciting Request for Qualifications from qualified medical provider for Worker's Compensation, Post-Accident Drug and Alcohol Testing and Bloodborne Pathogen Program. The selected vendor will provide the listed services, and the others as needed, for a period of one (1) year with four (4) additional optional years.

All offerors must submit a list of medical malpractice claims, Medicaid and Medicare fines, licensing or disciplinary actions and any DHEC actions for the past five years and include the disposition of those matters.

Employee Workers' Compensation Program

Aiken County has approximated 900 employees, with 325 emergency workers (Sheriff and Emergency Services), and 65 CDL drivers. There are about 250 new hires each year, with 90 being emergency workers and 20 CDL drivers. The selected provider must have the ability to provide treatment for work related injuries and post-accident drug and alcohol testing. All services should be available during the provider's stated business hours without an appointment.

County staff will work with the selected provider to provide as much advance notice as possible. Questions concerning this solicitation should be submitted to procurement@aikencountysc.gov. Questions & Answers will be posted to the Aiken County Website if applicable.

<https://www.aikencountysc.gov/Depts/PRC/PRCmain.php>

PROPOSAL REQUIREMENTS:

Offerors should submit the following information:

1. Letter summarizing the facility's ability to meet the needs of the County's post-incident workers' services;
2. Signed Proposal Document;
3. Description of the facility/facilities to include daily hours of operation
4. Number and qualifications of the professionals that will be involved in the County contract
5. On-site testing and x-ray capabilities
6. Estimated wait time for employees to be examined by a provider
7. Turnaround time for work restrictions to be faxed to risk manager and adjuster
8. A list of basic supplies kept in the office, such as braces, splints, etc., that can be provided to the employee
9. Cost to administer bloodborne pathogen program
10. Cost to administer post-accident drug and alcohol testing
11. References from two current clients for similar work;
12. Price list (attached)

Part 2 – Insurance Requirements

The provider must maintain: (1) a minimum of one million dollars each occurrence and two million dollars in the aggregate in general liability insurance to cover the provision of these services as well as fines that could be imposed by Federal or State regulatory agencies, (2) a minimum of three million dollars each claim and three million dollars in the aggregate for medical professional liability – claims made basis and (3) other insurances required by State and federal law. If selected, the provider must present proof of insurance satisfactory to the County. The County must be an additional insured.

1. Workers' Compensation Injuries

For the last five years, Aiken County has had an average of 62 employee injuries per year, which have been covered by its workers' compensation program. These injuries vary from minor injuries to death. The County is requesting proposals from physicians for the provision of initial screening and treatment of all injuries except those which are so severe that they require immediate transport to a hospital emergency room. Provision for the County must authorize follow-up treatment and referrals to other specialists as designated by the workers' compensation administrator. Compensation for the treatment of workers' compensation injuries will be in accordance with the South Carolina statutory schedule.

Offeror shall provide qualification information for the initial treatment for work-related injuries:

- **Hours that medical services are normally available.** Aiken County has employees on duty 24 hours per day, 365 days per year. Availability of service will be an important factor in the proposal evaluation. Would you be able to provide services for after-hours injuries? How often are you closed for vacations, holidays, training, etc.?
- **Location** of the office(s). County employees are stationed throughout the County and accessibility/convenience is always a plus.
- **Flexibility to provide services without an appointment.** Indicate the normal business hours.
- **Use of Physician's Assistants.** Will an employee see a physician each time or will some services be provided by a Physician's Assistant (P.A.)? If a P.A. is used, will there a reduction in charges to the County?
- **Follow-up Visits.** Will there be a charge for follow-up visits if the sole purpose is to check the injury, not to provide additional treatment?
- **Philosophy on the treatment of injury.** What is your philosophy on treatment of injuries, i.e. light duty, bed rest, return to work, etc. (see sample injuries that follows)?
- **Wait time.** What is the estimated wait time before an employee is treated for a non-critical injury?
- **Prescription Drug.** What is your philosophy on pain management (see sample injuries that follow)?
- **Names.** Please provide the full names of all physicians in the practice with a description of their specialties, certifications and medical qualifications. List each state in which each staff member is licensed.

For each of the following injuries/incidents, please describe the treatment, the medicines, if any, to be prescribed, the amount type of work the injured employee can handle, and the number of days, if any, the employee should be off work and/or on restricted duty:

- **An EMT injures his/her lower back.**
- **An employee sustains a cut to the right arm, requiring five (5) stitches.**
- **A motor grader operator who is sensitive to insect stings is stung by a wasp on his/her leg.**
- **A Sheriff's deputy strains his/her knee.**

Offeror shall provide qualification information to administer the County's Hepatitis B vaccine program:

- **Hours that medical services are normally available.** How will you provide services for bloodborne pathogen exposures after normal business hours or when the office is closed for vacations or training?
- **Location.** Where is your office located?
- **Schedule of fees.** Provide a list of fees that you will charge for this service.
- **Experience.** State your experience in administering a program of this type.
- **Laboratory.** Identify the laboratory that will be used to provide interpretation of the titre evaluation test under this contract.
- **Name.** Identify the primary individual responsible for this program and their qualifications as well as the names of other key staff who will assist in administering the program. Please provide detail of the responsibilities of each staff member involved with the program.

By County ordinance, all employees who are involved in an accident, regardless of whether an injury was incurred or not, are required to be tested for drugs and alcohol. It is estimated that the County will need 100 to 200 drug and alcohol tests per year. The program will include:

- Administer the intoxilyzer screenings, follow-up testing and evaluations as prescribed by the Department of Transportation (DOT), the National Institute of Drug Abuse (NIDA), and Aiken County regulations.
- Administer 10 panel urine drug screenings, follow-up testing and evaluations as prescribed by DOT, NIDA, and Aiken County.
- Provide a written copy of the test results to the county Risk Manager including an interpretation/explanation of the results within one (1) to two (2) days of the testing.
- Conform to the prescribed methods for collecting, labeling, and shipping/mailing of specimens to the designated laboratory.

Offeror shall provide qualification information to administer the County's post-accident drug and alcohol testing program shall also provide the following qualification information:

- **Hours that testing services are normally available.** How will you provide services for bloodborne pathogen exposures after normal business hours or when the office is closed for vacations or training?
- **Location.** Where is your office located?
- **Schedule of fees.** Provide a list of fees that you will charge for this service.
- **Mobility.** Describe your ability to go to locations designated by the County to conduct after-hours testing, if such service is available.
- **Experience.** State your experience in administering a program of this type.
- **Laboratory.** Identify the laboratory that will be used to provide interpretation of the titre evaluation test under this contract.
- **Name.** Identify the primary individual responsible for this program and their qualifications as well as the names of other key staff who will assist in administering the program. Please provide detail of the responsibilities of each staff member involved with the program.
- **Laboratory's Name.** Please provide the name of the lab that will be used for all post-accident drug and alcohol testing.

Procedure and Fees	
PE	\$
Post-Accident UA	\$
Post-Accident Breath Alcohol	\$
Follow Up PE	\$

EVALUATION CRITERIA

Hours of Operation (30%): State clearly your regular office hours, including the days of the week your office is open. Also, include a list of the holidays that your office is closed. Indicate if you have staff on call that are available when the office is closed and explain how that call process works.

Location of Office (25%): State the physical address of your office(s) in Aiken County.

Qualifications of Medical Staff (25%): Prepare a brief statement regarding the general medical experience of the staff in your Aiken County office(s) including how long each member has practiced in her or his medical field.

Experience administering Worker's Comp Programs (10%): Prepare a statement regarding your practice's experience in administering Worker's Comp Programs.

Experience administering Hepatitis B Programs (10%): Prepare a statement regarding your practice's experience in administering a Hepatitis B Program/Bloodborne Pathogen Program and Post-Accident Drug and Alcohol Testing.